

## **SOROPTIMIST INTERNATION OF DAVIS**

## **Membership Application**

The following information is submitted in the belief that the person named below is eligible for membership in Soroptimist International of Davis. Some of this information will be used for the S.I. Davis Roster issued to all members.

Name:	Birthday:
Firm or Business Name:	
Business Address:	
Business Phone:	Title or Position:
Home Address:	
Home Phone:	Cell Phone:
E-mail	
Husband/Partner name:	
Community Activities or Organizations	
Sponsor or referral	
Remarks	
Date submitted	
You can submit this form to your sponsor, Membership Coordinator, or the club president.	
*For club use only*	<ul><li>□ Name tag</li><li>□ Mentor</li></ul>
<ul><li>Potential member packet</li><li>Dues</li></ul>	☐ Installation Date
<ul><li>□ E-mail to members</li></ul>	<ul><li>☐ Mom packet</li><li>☐ Picture</li></ul>
<ul> <li>Application to membership commit</li> </ul>	
<ul><li>Application to membership commit</li><li>Enter SIA website</li><li>Form 5008 sent</li></ul>	ttee